N09 000009840

(Requestor's Name	e)
(Address)	
(Address)	
(Address)	
(City/State/Zip/Pho	ne #)
PICK-UP WAIT	MAIL
(Business Entity N	ame)
(Dusiness Linuty 14	ame,
(Document Number	er)
Certified Copies Certificat	es of Status
Special Instructions to Filing Officer:	

Office Use Only



000395481440

10/06/22--01019--005 **52.50

2022 OCT -6 PM 4:58
SECRETALISHES FILE
TAIL ALLESSES FI

e Much

COVER LETTER

. TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	lows Assisted Living Facili	ty, Inc	
N09000009840			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee ar	e submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Vicke Mack			
	(Name of Contact Pe	rson)	-
J.H. Floyd Foundatiom			
	(Firm/ Company)	
3078 Lockwood Lake Circle			
	(Address)	• .	
Sarasota , Fl. 34234			
	(City/ State and Zip C	Zode)	
Vmack@sunshinemeadows.com			
E-mail address: (to b	e used for future annual rep	ort notificatio	n)
For further information concerning this matter, p	please call:		
Vicke Mack	nt.	941	536-5731
(Name of Contact P		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount m	ade payable to the Florida i	Department of	State
□ \$35 Filing Fee □\$43.75 Filing Fe Certificate of St	ee & \$\Bigsiz\$ \$\\$43.75 \text{ Filing Fee} atus \text{Certified Copy} (\text{Additional copy is enclosed)}	Ceitif s Ceitif	O Filing Fee Teate of Status Ted Copy tional Copy is osed)
Mailing Address Amendment Section		ect Address	ian

Amendment Section Division of Corporations P.O. Box 6327 Tallahussee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2022 OCT -6 PM 4:58

(Name of Corporation as currently filed with the Florida Dept. of State) SECRL PART OF STATE TALLAHASSEE.FL Sunshine Meadows Assisted Living Facility, Inc. (Document Number of Corporation (if known) Pursuant to the provisions of section 617-1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: J. H. Floyd Foundation, Inc. name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) J. H. Floyd Foundation, Inc. 935 N. Beneva Rd. Ste 801-51476, Sarasota Fl. 34232 C. Enter new mailing address, if applicable: J. H. Floyd Foundation, Inc. (Mailing address MAY BE A POST OFFICE BOX) P.O. Box51476 Sarasota, Fl. 34232 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: 3078 Lockwood Lake Circle, Sarasota F. 34234 (Florida street address) New Registered Office Address N/A , Florida j iZip Codei New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please-note the officer director title by the first letter of the office title:

 $P \neq President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	IT John Do V Mike Jo SV Sally Si	<u>nes</u>	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change Add	Director	Yolanda Ryan	P.O. Box 51476 Sarasota, Fl. 34232
Remove 2) * Change Add	Secretar	Vicke Mack	P.O. Box 51476 Sarasota, Fl. 34232
Remove 3) * Change Add Remove	Director	George Bumbray	P.O. Box 51476 Sarasota Fl. 34232
4) Change Add	Chairma	James Brown	2439 Walker Circle Sarasota Fl. 34234
7. Remove Change Add	Treasuer	Scott Biehler	P.O. Box 51476 34232
Remove 6) Change Add			
E. <u>If amending or addin</u> (attach additional shee		cles, enter change(s) here: (Be specific)	
The following Articles ar		ows: ndows Assisted Living Facility Inc. herein aff	tor referred to as the Corporation. Sh
Article IV: is ammended		nova rassisted from 1 active the never an	er reterried to as the Corporation, on
a. To provide scholarship	s targeted toward (persons seeking careers in healthcare, housing	ng assistance grants to health care

Article V - b. is changed -To provide scholarships and grants.	<u> </u>
<u> </u>	
the date of each amendment(s) adoption:ate this document was signed.	, if other than
Effective date <u>if applicable</u> : no more than 90 days after amendment file date)	

The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

•	Dated September 20, 2012
	(By the yhairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)

(Title of person signing)